

**Pacific Southwest Regional Medical Library**  
**Minutes of the Regional Advisory Committee**  
**April 5, 2000**

ATTENDEES: Gloria Arredondo, Sharon Berglund, Ysabel Bertolucci, John Breinich, Mary Lou Goldstein, Cynthia Henderson, Florence Jakus, Jenny Reiswig, Tom Rindfleisch, David Rios, Russ Toth, Michael Whaley (for Gerald Ackerman)

PSRML STAFF: Alison Bunting, Elaine Graham, Claire Hamasu, Clair Kuykendall, Andrea Lynch, Heidi Sandstrom

Elaine Graham welcomed participants and reviewed the objectives for the day: to get input for developing future programs and to get feedback about ongoing PSRML programs. Next, participants were asked to introduce themselves and to describe one notable development in their respective environments.

#### INTRODUCTIONS

John Breinich – Hawaii Medical Library is consolidating its historical and archive activity into a single center and will provide electronic access to the materials. Digitization of the historical materials is supported by an endowment. HML is also working on a virtual museum of medical instruments.

Sharon Berglund – The HIPHIVE project's training efforts on e-resources have gotten a great response. This project initially was to include training for small groups of participants, but there have been occasions when 40 people have signed up.

Michael Whaley – Nevada is making progress in spreading computing technology and connectivity throughout the state; expansion of a video network is underway. The University of Nevada, Reno is looking forward to building its new medical library. Statewide distribution of medical services is increasing in Nevada.

Tom Rindfleisch – As noted in a recent *US News & World Report* article, Stanford University, along with other medical schools, faces funding challenges. Library renovation is a \$185 million project.

Jenny Reiswig – UCSD has a consumer health grant award to do outreach at the Preuss School, a charter school on campus. UCSD will be building a new biomedical library in 2004. There is an ever-increasing demand for electronic resources.

Russ Toth – The California AIDS Clearinghouse has distributed 3.5-4 million users with health education materials through over 14,000 AIDS service providers. These materials are targeted to African Americans, Latinos, Vietnamese, Koreans, and Chinese.

Ysabel Bertolucci – Kaiser has a task force to look at information services; only one librarian was appointed to the task force. Kaiser is building eight new hospitals in California that will have call room/medical libraries. Kaiser wants to provide library service on a national level. She noted that the library is no longer in charge of information.

David Rios – Loma Linda University is conducting a pilot project in consumer health information.

Gloria Arredondo – The Arrowhead Regional Medical Center is a new hospital, occupied just a year ago. The Inland Empire medical library consortium is meeting again; members recognized the importance of networking.

Mary Lou Goldstein – Scottsdale Healthcare is celebrating the first anniversary of the consumer health library in Fashion Square in Scottsdale. The hospital consumer health library is now three years old. New women's center and cancer center are planned. Consumer health information services are being funded as community outreach. The Library's web presence is expanding, with requests coming in via the Internet. Attractions have included diabetes screening, flu shots, and a turn-in your toothbrush campaign (500 people attended over a two-hour period).

Cynthia Henderson – The Library supports nursing, occupational therapy, physical therapy, and physician assistant programs at Samuel Merritt College. A series of acquisitions and mergers has left employees at the associated health care institutions nervous about their jobs. So far, these changes have not affected the library.

Florence Jakus – The Las Vegas Clark County Library District has received a Gates Foundation grant, in addition to an LSTA grant and a PSRML subcontract for developing consumer health information services. Greater emphasis is being placed on e-resources at the West Charleston Library.

## AGENDA REVIEW

The objectives of the meeting were to gather ideas about future directions for health sciences libraries, to obtain input for planning and developing future NN/LM programs to improve access to health information for health professionals and the public, and to get feedback about ongoing PSRML programs and services.

## FUTURE DIRECTIONS FOR LIBRARIES

RAC members were asked to describe what they envision for their libraries in the next five years (or longer). Member comments included:

- The library of the next decade will acquire digital access to all information.
- The library has a role as the mediator of access to digital resources (e.g., licensing).
- The concept of a library as a "place" will endure – it will be an access point for archives of older materials and a center for document delivery management. It will house librarians who add value to resources through teaching and guiding information access.
- The teaching role of libraries will evolve – libraries will make information and instruction available on demand, in a just-in-time mode.
- Libraries will be involved in tailoring, targeting, and mediating; for example, libraries can create a user interface that integrates information resources.
- Health sciences libraries will make referrals to appropriate information resources for consumers.
- Getting connected to the Internet will be vital. Libraries will deal much more with video and other media.
- The library will need to be "turned inside out" to bring information to the workplace.
- Research is important to be aware of usage trends (for example, usage of print journals that have online equivalents and of titles that are not online).
- There is concern that the increasing tendency of users to use only materials available digitally will lead to poor scholarship.
- Digitizing should be considered as a national priority – what does it mean for the library to consider digitizing the entire collection?

- Libraries will be more involved in health professional education (e.g., doing video capture of classes to be put up on the Internet and expanding media labs for use of video and electronic resources).
- There will be more demand for service to remote sites (for example, video conferencing and online, tailored instruction). However, there will still be a desire for a person to facilitate and answer questions (adding back the human factor).
- The Internet is still a barrier for some users. The digital divide by age groups is disappearing. The CD-ROM format persists as an easy-to-use technology that is sometimes more available to individual users.
- Enhancing information retrieval – through organizing, indexing, and applying metadata – will continue to be a key library function.

## INTERNET CONNECTIVITY

RAC members were asked to consider the questions on Internet access: is there widespread Internet access within institutions, and where it's available, can end users readily access it?

At some health sciences institutions, Internet access has been provided initially to all via the institutional network, but incidents or firewall concerns have led to removing institution-wide access. In some instances, the library is separated from the institution's network and has Internet access through its own service provider. In this case, users have Internet access, but not from their desktops. On the other hand, many institutions now have less fear about firewall issues. Technical firewall problems created difficulties in accessing electronic subscriptions at some locations; those problems were resolved with a proxy server. One library reported that because of an Internet prank, the library was losing its generic login access to electronic resources; the library will be able to use only resources that can be authenticated by individual passwords. Some individuals, such as residents and physicians, will have their own login IDs; who decides who deserves a login ID? Use of Internet computers in libraries for entertainment or checking investments puts a strain on scarce resources when the number of workstations is limited and many users are competing for access.

Public libraries are still trying to get enough workstations for Internet access. Public library patrons use various Internet applications, from doing research to checking their e-mail. Filtering Internet access is a major concern for public libraries; the State of Hawaii is considering a statewide filtering law for public libraries.

Segmentation of networks to forestall Internet access can be viewed as a losing battle. Abuse of Internet access is a value problem with the users; legislation will not resolve this issue. We are moving toward ubiquitous Internet access, with convergence of many applications over this "pipe." Misuse of the web in the workplace is a management issue that can be compared to inappropriate use of workplace phones.

Of 61 health jurisdictions in California, 58 counties are linked to the Internet. The cities, with large government bureaucracies, have encountered more barriers to linking than the smaller jurisdictions have.

## CONSUMER HEALTH INFORMATION

Public use of MEDLINE has risen dramatically over the last few years since the advent of free access on the National Library of Medicine web site. Subsequently, NLM introduced MEDLINE*plus* and incorporated consumer health information services into the framework of the NN/LM program. PSRML has begun working with NN/LM members, state libraries, state library associations, and other non-health sciences libraries and agencies to determine existing services, assess needs, and facilitate partnerships. RAC members contributed the following observations on the needs and challenges in providing health information to the public.

- Physicians are more involved – they are providing an increased level of follow-up on the information needs of their patients, including providing referrals to consumer health information centers and health sciences libraries.
- Consumers need just-in-time information and training. We cannot expect to be able to do the advance training that occurs in academic and health care environments.
- The reading level of most material is too high and terminology is too difficult.
- Information is not specific enough for the information need.
- Information on the topic at the consumer level often doesn't exist.
- We need to cater to the margin of what people don't know – a resource doesn't serve you well if it contains what you already know.
- Librarians are positioned to do selection and integration of resources for consumers.
- Visual information (graphics) is helpful especially when there is a language barrier.
- Consumer demand is high for videos on health topics (the demand is high in all age groups, adults as well as children).
- The information need is immediate. There is a need for follow up to provide additional information as the consumer progresses from basic to more complex information on a topic. However, when consumers need more than basic consumer-oriented information, they may not be ready for professional-level literature.
- Key issues include: 1) Who will digest or “boil down” the information? and 2) How can the information be tailored to the patron?
- Different environments foster different types of consumer health information services; hospital services tend to be condition (disease) focused, while mall services tend to focus on wellness issues (e.g., fitness and nutrition).
- There is interest in consumer health programs that teach people preventive health practices.
- Health education has shifted from classes to individualized, customized information.
- Research is needed to show how information affects health decisions.
- Groups to work with in promoting consumer health information access include non-health related community groups and agencies, community activities (fairs), churches, neighborhood groups. Beauty parlors and nail shops could be sites for health information to be disseminated between women. Women are recognized as health information seekers, both for themselves and for their families. The aged are another group with a high level of interest in obtaining health information.
- Other groups to work with might include unbiased vendors of education materials. Pharmaceutical companies are providing free health information, but may not be unbiased.
- Hospitals are interested in consumer health information services as being good for the community and good public relations for the hospital.

## OUTREACH TO HEALTH PROFESSIONALS

PSRML conducts outreach to health professionals through exhibits, on-site and distance educational sessions, and consultation on access to health information resources. While many programs have been successful, outreach to inner city clinics and smaller agencies has been hampered by local funding issues and time constraints of participants. In addition to direct outreach efforts, PSRML has awarded subcontracts for outreach programs conducted by NN/LM network members. A workshop is being offered in June to help develop network members' skills in preparing effective grant and contract proposals. RAC member suggestions for encouraging more proposals from network members included: 1) increasing the funding available for each award and 2) encouraging people to rework proposals based on reviewer comments and resubmit them when more funding is available.

It was suggested that PSRML hold an information summit for community-based organizations to help clarify what it is needed to improve information resources and access. Such a summit would help in assessing needs for training, grants, and other programs and would build coalitions between community-

based organizations, community hospitals, public libraries, and information service providers. Russ Toth described the summit approach used in the assessment process conducted by the California AIDS Clearinghouse to clarify its mission and prioritize roles. Russ Toth volunteered to partner with PSRML to carry out a similar community planning process to assess needs for information services.

The RAC commended the PSRML outreach team's efforts, noting that they have gone out into communities to work with people in their own environments; this has really made a difference.

## LIBRARY NETWORK SERVICES

PSRML and NN/LM network libraries have been preparing for the new web-based DOCLINE, expected to be released in late spring. Courses on business and organizational skills for working effectively within institutions were arranged in response to professional development needs identified during the regional E-Resources Symposium. The Internet connectivity program will continue; there are a number of NN/LM network members not yet connected. The response rate to the recent hospital evaluation survey was excellent; PSRML will be looking at the level of technology demonstrated in network libraries as well as drawing comparisons with results of past evaluations. The Institute for Scientific Information (ISI) has recognized BioSites as a scholarly, research-oriented web site worthy for inclusion in its Current Web Contents. RAC members agreed that the ISI logo noting this recognition should appear on the PSRML web site. A survey of *Latitudes* readers is planned; the newsletter became an electronic publication with the January/February 2000 issue. RAC members supported publishing articles when the information is timely and then periodically closing an "issue." Multiple e-mail messages alerting readers to the availability of articles and/or issues was not a problem.

PSRML requested ideas on encouraging more libraries to participate in Loansome Doc, particularly for unaffiliated health professionals and potentially for consumers. Members wondered if the National Library of Medicine would be able to incorporate a billing mechanism in Loansome Doc, especially one that would allow credit card payments. Many libraries cannot accept credit cards, so even though they can charge for filling the requests, they have no way to ensure payment. Offsite people who request items don't send in the promised payments for items that are mailed, or they decide they don't want them and don't come to pick them up and make payment. Therefore, libraries that can't obtain payment in advance or do credit card transactions cannot participate Loansome Doc, even though they are willing. Some libraries will allow unaffiliated health professionals or the public to come in and use the collection and self-service copy. Some libraries do not provide copy service for their affiliated users, so cannot do that for unaffiliated people.

A question was raised as to whether Loansome Doc could display the holdings of the Loansome Doc provider or display the status of the request. Loansome Doc does not notify the user that the library does not own the item. Perhaps this could be achieved by designing a PubMed LinkOut to SERHOLD data for the library with which a Loansome Doc user is registered.

## REGIONAL ADVISORY COMMITTEE COMMUNICATIONS

RAC members indicated it was quite valuable to meet together, especially when a new committee is formed, so that people can meet each other. This lays the groundwork for follow-on discussions by e-mail or teleconference. Having a face-to-face meeting is the best approach when consensus development is the objective. It is also a good forum for generating new ideas or situational assessments; as ideas are contributed, other ideas are sparked within the group. While the members share the goal of enhancing health information access, their heterogeneous backgrounds and environments provide different perspectives on issues. Members thought that the exchange of ideas on topics of interest to PSRML was useful to them individually as well. Hearing different perspectives on issues expanded their horizons.

## CLOSING COMMENTS

Information is available in many locations, including much well done information that is free. The question is, how do users obtain the correct information?

Another group to target in outreach efforts would be journalists and others in the media. They need to learn how to find reliable sources and how to back up what they are saying in their articles and broadcasts.

A major health issue in California is chlamydia, reflected in formation of the California Health Services Chlamydia Coalition.

## DEMONSTRATIONS

The meeting concluded with demonstrations of PubMed, MEDLINE*plus*, ClinicalTrials.gov, and DOCLINE. Suggestions for enhancements were:

- Add a PubMed print option that includes the search strategy; this would be helpful for the end-user who wants to repeat a search done by an intermediary;
- Add a spelling correction function to MEDLINE*plus*; and
- Create a link from ClinicalTrials.gov to PubMed to do an author search for the principal investigator.